# 201609070200372953

### FEC FORM 2 STATEMENT OF CANDIDACY

SECRETARY OF THE SENATE

16 SEP - 7 PM 4: 11

. (a) Name of Candidate (in full) TODD CHRISTOPHER YOU	NG							
(b) Address (number and street) PO BOX 1053	dress changed		Candidate's FEC Identification Number     S6IN00191					
(c) City, State, and ZIP Code				3. Is This	П	New	T	Amende
BLOOMINGTON		IN 4740:		Statem		(N) O	R >	<u> (</u> A)
. Party Affiliation	5. Office Sought Senate		6. State & Distr IN	rict of Candida	ate			
DI	ESIGNATION OF F	PRINCIPAL	CAMPAIGN	COMMIT	ITEE			
. I hereby designate the following na	amed political committee a	s my Principal (	Campaign Comn	-	2016 (year of e		ection(s)	
NOTE: This designation should be	filed with the appropriate	office listed in th	he instructions.		-			
(a) Name of Committee (in full) FRIENDS OF TOD	D YOUNG, INC.							
(b) Address (number and street) PO BOX 1053								
(c) City, State, and ZIP Code								
BLOOMINGTON			IN	47402				
		Joint FundraisIn	g Representative	es)		expend ful	nds on b	ehalf of my
I hereby authorize the following na candidacy.  NOTE: This designation should be  (a) Name of Committee (in full)	(Including a med committee, which is the filed with the principal care	Joint FundraisIn NOT my principa	g Representative	es)		expend ful	nds on b	ehalf of my
I hereby authorize the following na candidacy.  NOTE: This designation should be	(Including a med committee, which is the filed with the principal care	Joint FundraisIn NOT my principa	g Representative	es)		expend ful	nds on b	ehalf of my
I hereby authorize the following na candidacy.  NOTE: This designation should be  (a) Name of Committee (in full)	(Including a med committee, which is the filed with the principal care	Joint FundraisIn NOT my principa	g Representative	es)		expend ful	nds on b	ehalf of my
. I hereby authorize the following na candidacy.  NOTE: This designation should be  (a) Name of Committee (in full)  YOUNG VICTORY  (b) Address (number and street)	(Including a med committee, which is the filed with the principal care	Joint FundraisIn NOT my principa	g Representative	es)		expend ful	nds on b	ehalf of my
I hereby authorize the following na candidacy.  NOTE: This designation should be  (a) Name of Committee (in full)  YOUNG VICTORY  (b) Address (number and street) PO BOX 1053	(Including a med committee, which is the filed with the principal care	Joint FundraisIn NOT my principa	g Representative	es)		expend ful	nds on b	ehalf of my
I hereby authorize the following na candidacy.  NOTE: This designation should be  (a) Name of Committee (in full)  YOUNG VICTORY  (b) Address (number and street) PO BOX 1053  (c) City, State, and ZIP Code  BLOOMINGTON	(Including a med committee, which is the filed with the principal care	Joint FundraisIn NOT my principa	g Representative al campaign con ee.	es) nmittee, to rec	ceive and			ehalf of my
I hereby authorize the following na candidacy.  NOTE: This designation should be  (a) Name of Committee (in full)  YOUNG VICTORY  (b) Address (number and street) PO BOX 1053  (c) City, State, and ZIP Code BLOOMINGTON	(Including of the committee) which is the filed with the principal care.	Joint FundraisIn NOT my principa	g Representative al campaign con ee.	47402  Indicate of the second	ceive and	ect and cor		ehalf of my
I hereby authorize the following na candidacy.  NOTE: This designation should be  (a) Name of Committee (in full)  YOUNG VICTORY  (b) Address (number and street) PO BOX 1053  (c) City, State, and ZIP Code  BLOOMINGTON	(Including a med committee, which is the filed with the principal care COMMITTEE)	Joint FundraisIn NOT my principal npaign committee	g Representativo al campaign con ee. IN my knowledge a	47402  Indicate of the second	true, corre	ect and cor	mplete.	
I hereby authorize the following na candidacy.  NOTE: This designation should be  (a) Name of Committee (in full)  YOUNG VICTORY  (b) Address (number and street) PO BOX 1053  (c) City, State, and ZIP Code BLOOMINGTON  I certify that I have ex	(Including a med committee, which is the filed with the principal care COMMITTEE)	Joint FundraisIn NOT my principal npaign committee	g Representativo al campaign con ee. IN my knowledge a	47402  Indicate of the second	true, corre	ect and cor	mplete.	

### FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

	2003)				Page 2 /
	DESIGNATION O	OF OTHER AUT			[ ADDITIONAL ]
hereby authorize the following name candidacy.	ed committee, which is NC	OT my principal campai	gn committee, to	receive and expend funds	on behalf of my
NOTE:This designation shou	ld be filed with the princ	cipal campaign com	mittee.		
(a) Name of Committee (in fu		THE MAJOR	RITY		
(b) Address (number and stre 228 S WASHINGTON S' SUITE 115	•				
(c) City, State and ZIP Code					
ALEXANDRIA			VA	22314	
	DESIGNATION (	OF OTHER AUT			[ ADDITIONAL ]
I hereby authorize the following nam candidacy.	ed committee, which is NO	OT my principal campa	lgn committee, to	receive and expend funds	on behalf of my
NOTE: This designation shou	ld be filed with the princ	cipal campaign com	mittee.		
(a) Name of Committee (in fu	.ax				
KEEP THE SEN	•				
(b) Address (number and str 228 S WASHINGTON ST	ATE RED 2016				
(b) Address (number and str 228 S WASHINGTON ST SUITE 115	ATE RED 2016 eet) IREET				
(b) Address (number and str 228 S WASHINGTON ST	ATE RED 2016 eet) IREET		VA	22314	
(b) Address (number and str 228 S WASHINGTON ST SUITE 115 (c) City, State and ZIP Code	ATE RED 2016  eet)  TREET  DESIGNATION C		HORIZED C	OMMITTEES	[ ADDITIONAL ]
(b) Address (number and str 228 S WASHINGTON ST SUITE 115 (c) City, State and ZIP Code	ATE RED 2016 eet) rREET  DESIGNATION C	OF OTHER AUT uding Joint Fundrais	HORIZED C	OMMITTEES tives)	-
KEEP THE SEN.  (b) Address (number and str. 228 S WASHINGTON ST. SUITE 115  (c) City, State and ZIP Code ALEXANDRIA	ATE RED 2016 eet) TREET  DESIGNATION C (Included committee, which is NO	OF OTHER AUT uding Joint Fundrais OT my principal campa	HORIZED C ing Representa ign committee, to	OMMITTEES tives)	-
KEEP THE SEN.  (b) Address (number and str. 228 S WASHINGTON ST SUITE 115  (c) City, State and ZIP Code ALEXANDRIA	ATE RED 2016  eet)  [REET]  DESIGNATION C  (Included committee, which is Noted to the filed with the principle of the princip	OF OTHER AUT uding Joint Fundrais OT my principal campa	HORIZED C ing Representa ign committee, to	OMMITTEES tives)	-
KEEP THE SEN.  (b) Address (number and str. 228 S WASHINGTON ST SUITE 115  (c) City, State and ZIP Code ALEXANDRIA  I hereby authorize the following namicandidacy.  NOTE:This designation should	ATE RED 2016 eet) TREET  DESIGNATION C (Included committee, which is NO	OF OTHER AUT uding Joint Fundrais OT my principal campa cipal campaign com	HORIZED C ing Representa ign committee, to mittee.	OMMITTEES tives) receive and expend funds	on behalf of my
(b) Address (number and str. 228 S WASHINGTON ST SUITE 115 (c) City, State and ZIP Code ALEXANDRIA  I hereby authorize the following nam candidacy.  NOTE:This designation should	ATE RED 2016  eet)  REET  DESIGNATION O  (Included committee, which is NO eld be filed with the principal of	OF OTHER AUT uding Joint Fundrais OT my principal campa cipal campaign com	HORIZED C ing Representa ign committee, to mittee.	OMMITTEES tives) receive and expend funds	on behalf of my
(b) Address (number and str. 228 S WASHINGTON ST SUITE 115  (c) City, State and ZIP Code ALEXANDRIA  I hereby authorize the following nam candidacy.  NOTE:This designation should also the state of the	ATE RED 2016 eet) TREET  DESIGNATION O (Included committee), which is NO ed to be filed with the prince will) AND YOUNG H eet)	OF OTHER AUT uding Joint Fundrais OT my principal campa cipal campaign com	HORIZED C ing Representa ign committee, to mittee.	OMMITTEES tives) receive and expend funds	on behalf of my

### FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003) [ ADDITIONAL ] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) HOOSIER LEADERSHIP COMMITTEE (b) Address (number and street) PO BOX 1053 (c) City, State and ZIP Code **BLOOMINGTON** 47402 IN [ ADDITIONAL ] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) (b) Address (number and street) (c) City, State and ZIP Code [ADDITIONAL] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) (b) Address (number and street) (c) City, State and ZIP Code

### Faxed or Hand Delivered

## 20160907020037295

HART SENATE OFFICE BUILDING

### United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

WASHINGTION, DC 20510-7116
PHONE(202) 224-0322

USPS FIRST CLASS MAIL \_ Date of Receipt Postmark USPS REGISTERED/CERTIFIED\_\_\_/\_ Postmark USPS PRIORITY MAIL \_\_\_\_\_ Postmark DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL USPS EXPRESS MAIL **OVERNIGHT DELIVERY SERVICE:** SHIPPING DATE NEXT BUSINESS DAY DELIVERY FEDERAL EXPRESS **UPS** DHL AIRBORNE EXPRESS RECEIVED FROM FEDERAL ELECTION COMMISSION Date of Receipt NO POSTMARK POSTMARK ILLEGIBLE Date of Receipt

Date of Receipt or Postmark



SEN PATCH



SEN PATCH